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Date: February 2, 2006

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Application No.: 10/644,889
Filing Date: 8/20/2003
Title: Rotatable Handle for Reciprocating Saws
Inventor: Gist
Old Attorney Docket No.: PTG02924
New Attorney Docket No.: JK01506

Comments:

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Certificate of Facsimile Transmission (1 page)
Transmittal Form (SB-21) (1 page)
Request to Change Attorney Docket Number (1 page)
Revocation and New Power of Attorney (SB-82) (1 page)
Statement Under Rule 3.73(b) (SB-96) (1 page)
Rescission of Previous Nonpublication Request (SB-36) (1 page)

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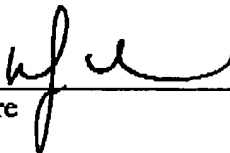
Application No.: 10/644,889
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Title: Rotatable Handle for Reciprocating Saws
Inventor: Gist
Art Unit:
Examiner Name:

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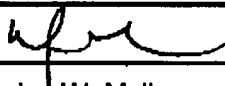
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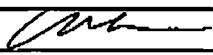
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TRANSMITTAL FORM		Application Number	10/644,889
		Filing Date	8/20/2003
		First Named Inventor	Gist
		Art Unit	
		Examiner Name	
(to be used for all correspondence after initial filing)		Attorney Docket Number	PTG02924
Total Number of Pages in This Submission	6		

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile Transmission Request to Change Attorney Docket Number Revocation and New Power of Attorney (SB-82) Statement Under Rule 3.73(b) (SB-96) Rescission of Previous Nonpublication Request (SB-36)
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Black & Decker		
Signature			
Printed Name	Wesley W. Muller		
Date	February 2, 2006	Reg. No.	50,988

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name	Vanessa Williams	Date	February 2, 2006

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February 2, 2006
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Re: Request to Change Attorney Docket Number

Application No.: 10/644,889
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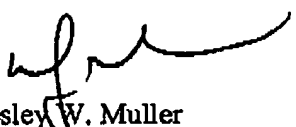
Dear Sir or Madam:

Please change the attorney docket number for this application to:

JK01506

If you have any questions, please contact Mary Niziolek at (410) 716-2707.

Respectfully submitted,


Wesley W. Muller
Reg. No. 50,988